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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS Any information copied from such Reports and Statement		Use separate schedule(s) for each category of the Detailed Summary Page		(check or	☑ 17 □ 20a	☐18 ☐20b		19a 20c	1497 19b 21	
commercial purposes, other than using the n									•	
Amount of Disbursement this Period										
Tammy for Illinois		****								
Full Name (Last, First, Middle Initial)  Verdolino & Lowey, PC					Date of Disbursement					
Mailing Address 124 Washington St Ste 101					02	29		2016		
City Foxboro	State MA	Zip Code 02035-1368		A	mount of Ea	ch Recei	ot this f	Period		
Purpose of Disbursement Accounting & Compliance			001	ַן[רָ <b>ר</b>				8559.	58	
Candidate Name			Category Type	"    `	Memo Item					
Office Sought: House Senate President State: District:	Disbursement Fo Primary Other (s	General			ransaction II	); VN7ME	9VMK	.Q9		
Full Name (Last, First, Middle Initial) VSP Vision Care  Mailing Address 121 SW Morrison St					Date of Disbu	irsement	· ·	2016		
Ste 1050	State	Zip Code						الم ما ما		
Portland	OR	97204-3119			Amount of Ea	ich Receij	ot this i			
Purpose of Disbursement Insurance Candidate Name	·		001 Category	]    L	162.18					
Office Sought: House Senate President State: District:	Disbursement Fo Primary Other (s	✓ General	Туре	т	ransaction IC	D: VN7ME	9VPY(	65		
Full Name (Last, First, Middle Initial) Sharon Weber					Date of Disbu	ırsement				
Mailing Address 1654 W 18th PI Apt 2					03	17	L	2016		
City Chicago	State IL	Zip Code 60608-2838		_	Amount of Ea	ch Recei	ot this I	Period	<u>_</u>	
Purpose of Disbursement Reimbursement - See Below if Itemized Candidate Name			001 Category	]   [ "					68	
Office Sought: House Senate President State: District:	Disbursement Fo	✓General	Туре	т	ransaction II	D: VN7ME	:9VP50	<b>Q5</b>		
								000	2.44	
SUBTOTAL of Disbursements This Page (o TOTAL This Period (last page this line num								908	2.44	